

SECRET  
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# REPORT OF TRAVELER'S LEAVE

TO: ☒ Chief, Compensation and Tax Division

☐ Chief, Mobilization and Military Personnel Division

FROM: ☐ Central Travel Branch

DATE

7/17/74

PERIOD OF TRAVEL VOUCHER

FROM 11 JULY 74 TO 12 AUG 74

☒ OC-S/AD/FB/FSS

NAME OF TRAVELER (Indicate "P" if Pseudo)

EMPLOYEE NUMBER

48 2612

25X1A9a

Was traveler authorized Home Leave? ☒ Yes ☐ No

Number of days H/L authorized 15

Audit of the travel voucher indicates leave taken as indicated below. If not previously reported, please charge as shown:

TYPE

PERIOD

HOME

1345 12 JULY TO 1000 25 JULY 74

HOME

2000 26 JULY TO 0530 12 AUG 74

16 E 7/20

HL HL

48

17 E 8/3

72

20

18 E 8/17

40

40




900 LP 3

25X1A9a

Distribution: Original to C&TD or MMPD  
1st carbon copy to Original Travel Voucher  
2nd carbon copy to Employee

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25X1A9a

TRAVEL VOUCHER		Approved For Release 2001/08/02 : CIA-RDP82-00357R000600050004-1		VOUCHER NO. 2-12 (For finance use only)						
SUBMIT AN ORIGINAL AND ONE COPY		482612		513672 SEP 2074						
OFFICIAL DUTY STATION OR OFFICE, BLDG. ROOM NO.	TELEPHONE EXT.	PAYMENT AND/OR BANKING INSTRUCTIONS		TRAVEL ORDER NUMBER OR AUTHORITY FOR TRAVEL						
1201 Ames		CASH <input checked="" type="checkbox"/> TREAS-CHECK <input type="checkbox"/> BANK CASHIER CHECK <input type="checkbox"/> DEPOSIT <input type="checkbox"/>		983-74						
SUMMARY OF EXPENSES CLAIMED		Send check to  Ex 4146		I CERTIFY FUNDS ARE AVAILABLE						
FROM 11 July 1974 to 12 Aug 1974	OBLIG. REF. NO. CHARGE FAN ACCOUNT NO.									
PER DIEM 238.50	983 4179-9400 25X1A6d									
TRANSPORTATION 1909.48	DATE AUTHORIZED SIGNATURE									
OTHER 98.91										
TOTAL CLAIMED 2246.89										
LESS ADV., FUNDS AND TRANSP. FURN. 2081.00										
BALANCE DUE TRAVELER 165.89										
BALANCE DUE FROM TRAVELER (Attach copy of refund receipt)										
THIS SPACE FOR OFFICE OF FINANCE USE ONLY		I certify that this voucher and any attachments are correct, the expenses were incurred on official business, and that payment or credit has not been received.		DESIGNATION OF AGENT TO PICK UP CASH (both signatures required when applicable) I authorize my agent, whose signature appears below, to receive currency amounting to _____ of official funds on my behalf and acknowledge receipt of such funds and my responsibility therefor, when paid to my agent.						
TOTAL CLAIMED		DATE 12 SEP 74	APPROVAL <input type="checkbox"/> REQUIRED <input type="checkbox"/> NOT REQUIRED		DATE SIGNATURE OF AGENT					
ADJUSTMENTS: per AADS			APPROVED		DATE SIGNATURE OF PAYEE					
NET ALLOWED		DATE	SIGNATURE OF AUTHORIZING OFFICIAL		RECEIVED IN CURRENCY					
LESS ADVANCES, FUNDS AND TRANSPORTATION FURNISHED			on travel order		25X1A9a					
BALANCE DUE TRAVELER		DATE	CERTIFIED FOR PAYMENT OR CREDIT		DATE SIGNATURE OF AGENT <input type="checkbox"/> AGENT <input type="checkbox"/> PAYEE					
BALANCE DUE FROM TRAVELER		17 SEP 1974	SIGNATURE OF CERTIFYING OFFICER							
SPACE BELOW FOR EXCLUSIVE USE OF OFFICE OF FINANCE										
DESCRIPTION—ALL OTHER ACCOUNTS 13-33		34-39 STATION CODE	40-41 E X C O D E	42-47 OBLIG. REF. NO.	48-49 OBL. REF. SUB. NO.	50 LC REF. QD	51-54 GENERAL LEDGER ACCT. NO.	55-66 COST—FAN ACCOUNT SYMBOL	67-70 OBJECT CLASS	71-80 AMOUNT
DESCRIPTION ADVANCE ACCOUNTS 13-27		28-33 T/A NO. SHIP. DOC. NO.	32-33 DIV. PROJECT NO.	ADVANCE ACCT. NO. EMP. NO.				61-66 CK. NO. X REF. NO.	68-70 OC OR DUE DATE	DEBIT CREDIT
25X1A9a				88 983		2	4241	4 179-9400	2 132	2246 89
				482612			1441	983		2081 00
							1106			165 89
DATE 9 Sep 74		PREPARED BY 		DATE		REVIEWED BY		TOTALS		
						E2 IMPDET, CL BY: 025394		2246 89		2246 89

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SCHEDULE C ADVANCES, FUNDS AND TRANSPORTATION FURNISH FOREIGN CURRENCY							
DATE	SOURCE	CASH	TICKETS	GTRS	AMOUNT	RATE OF EXCHANGE	AMOUNT
19							
25X1A6a							2081.00
TOTAL							2081.00

25X1A6a SCHEDULE OF TRANSPORTATION COSTS (Attached receipts)						
MODE	CARRIER	ACCOMMODATIONS OR MILEAGE	FROM	TO	HOW OBTAINED GTR #, CASH, OTHER	COST
Allowed		O/W air		+8%		1554.74
Allowed		O/W POV				46.08
Allowed		O/W air				308.66
TOTAL						1909.48

**QUARTERS OR MEALS FURNISHED WITHOUT COST OR AT NOMINAL COST AND LEAVE TAKEN**

Specify below any leave taken and any quarters or meals furnished by the Government without cost or at a nominal cost to traveler during period covered by this travel voucher and make appropriate deduction from schedule of expenses. (If none, state "NONE")

LEAVE—TYPE—DATE(S)—TIME	H/L 1345 12 July 74 to 1000 25 July 74
QUARTERS—DATE(S)	H/L 2000 26 July to 0830 12 Aug 74
MEAL(S)—DATE(S): Specify B for breakfast, L for Lunch and D for Dinner	

**SCHEDULE OF EXPENSES OTHER THAN TRANSPORTATION AND ITINERARY OF TRAVELER\***

DATE 19	(Furnish complete itinerary, showing departure and arrival times, per diem claimed, and other expenses, in chronological sequence.)	AMOUNT CLAIMED	
		PER DIEM	OTHER
	See attached per diem & other expenses	238.50	98.91
CHECK ONE:	<input checked="" type="checkbox"/> TOTALS	CARRIED FORWARD	
		238.50	98.91

USE CONTINUATION SHEET FORM NO. 22a. IF ADDITIONAL SPACE IS REQUIRED

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EMPLOYEE NUMBER

48 2612

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1345 12 JULY TO 1000 25 JULY 74

Home

1000 26 JULY TO 0830 12 AUG 74

SIGNATURE OF CERTIFYING OFFICER

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